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Authors

Prince, L
Calleo, V
Welch, K
[et al.](#)

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3 Student Creation of Social-Media Based Teaching Tools as a Required Component of a Fourth Year Emergency Medicine Subinternship Curriculum

St. George J, Rafie C, Simon G, Tedeschi C /Weill Cornell Medical College, New York, NY; New York Presbyterian Hospital, New York, NY; New York; Columbia University Medical Center, New York, NY

Background: It has become increasingly important for educators to address student interaction with medical education-focused social media, and to enable students to critically appraise and contribute in this domain. Faced with students with varied learning styles and a finite amount of classroom time, we replaced a required sub-internship oral presentation with the “EM Design Challenge” in which students create an online learning tool for their peers.

Educational Objectives: The exercise aims to introduce students to the creation of appealing, informative and accurate online teaching tools. An additional goal is to reinforce learning on a topic of the student’s choosing.

Curricular Design: Sub-interns are first exposed to a didactic presentation and hands-on workshop introducing them to online, social media-based medical education. They then create an online teaching tool at the MS4 level, for inclusion on the course’s private Google Plus social network site. Posts ideally include links, videos, photos, and the capacity for commentary and feedback. Students are encouraged to utilize formats best to suited their topic: video, slide decks, infographics, podcasts, etc. Platforms include (but are not limited to) YouTube, Haiku Deck, Vine, Piktochart, and Instagram. The posts are archived on the social media site, and available to past, present and future course participants. Formative feedback is provided via online comments from peers, senior residents, and faculty. Summative feedback and a scored evaluation are obtained via an online evaluation process which assesses EM relevance, accuracy, creativity and engagement, use of references and links, and potential to serve as an innovative educational tool.

Impact/Effectiveness: Contemporary medical students learn in the online space. Our format enables them to create content for their peers, fostering a deeper learning of both EM core content and the educational process. To date, nearly 100 students have submitted Design Challenge posts, all of which are accessible to the course community. Preliminary feedback indicates that students prefer the assignment to a traditional presentation, and have found the approach unique and educational, cultivating skills which will be essential to them as they become resident-educators.

4 The Patient Experience Shift: Enhancing Medical Student Attitudes Toward Patient-Centered Care

Prince L, Calleo V, Welch K, Wojcik S /SUNY Upstate Medical University, Syracuse, NY

Background: Literature indicates that patient-centered attitudes and behaviors declines throughout medical school and residency. Patient-centered care has been linked to improved patient outcomes and patient satisfaction.

Educational Objectives: Improve student attitudes toward patient-centered care. Observation of practitioner/patient communication. Identify Emergency Medicine (EM) barriers that detract from patient-centered care.

Curricular Design: A four hour patient experience shift was developed by EM clinical and research faculty, residents and medical students as part of the existing one month Adult Acting Internship elective in EM. The module was approved by the Associate Dean for Undergraduate Medical Education prior to implementation. Students were orientated, completed the pre Patient-Practitioner Orientation Scale (PPOS), were advised to not provide patient care during the four hours but to experience the emergency visit as the patient and completed an ICARE observation form. Patients were given an orientation letter and gave verbal permission to allow the student to observe their care. Patients were selected by residents or clinical faculty with priority for patients with chief complaints of chest pain, abdominal pain, neurological, syncope or headache roomed shortly prior to assigning a student. Students completed a reflective essay, the post PPOS and were debriefed at completion of the elective. Implementation difficulties included ongoing education of staff on execution of new module, the time commitment for student orientation and debriefing monthly, and that a four hour experience may not be enough to impact students PPOS scores.

Impact/Effectiveness: 28 students participated. Median post PPOS score were statistical more patient-centered overall (74.5 pre vs. 72.5 post) as well as for the caring subscale (34 pre vs. 32.5 post) but not for the sharing subscale (40.5 pre vs. 40.0 post). There were no statistical differences in the PPOS or its subscales between students by gender. During debriefing, students recommended continuing the module and expressed that the experience was valuable in showing them the perspective of the patient during care and impacted how they would personally communicate with patients.